## 1403 - 134 - 2529

Use

Only

## STATEMENT OF **ORGANIZATION**

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4. IS THIS STATEM	ENT 🔀	NEW (N)	OR	0	AMENDE	ED (A)							
I certify that I have ex	camined this St	atement and	to the best	of my know	wledge and	belief it	is true	e, corre	ect and	comple	ete.		
Type or Print Name or	f Treasurer Pa	aul Kilgore	D ISh					····					<u>.</u>
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Signature of Treasurer	Paul Kilgore	<del></del>		<u>V</u>	<del></del>	<del></del>	Date	1		2.5	ذ	2, 0	14
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Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

**FEC FORM 1** 

(Revised 06/2012)